



State of Washington  
Department of  
Labor and Industries

# PROVIDER BULLETIN

Published by Health Services Analysis Section • Olympia, Washington 98504-4322

**PB 97-04**

## THIS ISSUE

### Neuromuscular Electrical Stimulation (NMES) Device

#### TO:

Chiropractors  
Clinics  
DME Suppliers  
Home Health Agencies  
Hospitals  
Managed Care Organizations  
Nurses Services  
Pain Clinics  
Physical Therapists  
Physicians  
Podiatrists  
Rehabilitation Centers  
Training Facilities

#### FROM:

**Jonathan Milstein**  
Department of Labor and  
Industries  
PO Box 44321  
Olympia, WA 98504-4321

(360) 902-6298  
(360) 902-4249 FAX

This bulletin describes and explains the department's recently adopted Neuro-muscular Electrical Stimulation (NMES) Device policy, and clarifies when the insurer, State Fund and Self-Insurer, will approve use of NMES devices. This policy is effective October 31, 1997.

#### **What is considered a NMES device?**

A NMES device sends an electrical stimulus to a motor nerve or directly to muscle that causes the muscle to contract.

NMES devices are used to:

- (1) Strengthen and train healthy muscles that are at risk of atrophy from immobilization or disuse due to injury; or
- (2) Stimulate denervated muscles to prevent atrophy and muscle degeneration.

There are numerous devices marketed as NMES or equivalent devices. Payment for devices that are categorized by the Food and Drug Administration (FDA) as NMES will be approved according to the following NMES policy.

#### **What are the limits on using NMES devices at home?**

Use of NMES devices at home requires pre-authorization.

Approval of NMES devices for home use requires that all of the following conditions be met:

1. The patient has suffered partial or complete loss of function in one more muscles because of an injury to a peripheral nerve or nerve root, and
2. Denervation is substantiated by electromyography (EMG) confirming the nerve injury. The EMG must demonstrate positive waves and/or fibrillation in the affected muscles.

For State Fund claims, in addition to the above listed requirements, a department medical consultant must review the documentation and confirm that at-home use of NMES is medically necessary. The medical consultant will recommend an appropriate time frame for use of the device, based upon the injury.

---

**Is Prior Authorization Required for use of NMES in the clinical setting?**

NMES devices are one of several physical therapy modalities that may be employed in the clinical setting without pre-authorization. Use of physical therapy treatment is limited in number of treatments the patient may receive, not by modality. Therefore, pre-authorization for this specific modality (NMES) in the clinical setting is not required.

**What are the limits on physical therapy treatment in a clinical setting?**

The number of physical therapy treatments allowed without pre-authorization is explained in detail in WAC 296-21-290 and WAC 296-23-220.

**Further Information:**

For further information, clarification or a copy of the policy, please contact Jonathan Milstein at (360) 902-6298.

### **Authorization and Billing Codes for NMES Treatment**

<b><u>Procedure</u></b>	<b><u>Billing Code</u></b>	<b><u>Prior Authorization Necessary?</u></b>	<b><u>Frequency of Authorization After Initial Visits</u></b>
Rental for home use	E0745	Required	Based on medical consultant review
Physical modality administered in office by a physical therapist: <ul style="list-style-type: none"> <li>Electrical stimulation - unattended</li> <li>Electrical stimulation - attended</li> </ul>	97014 97032	Not required for first 12 visits or one month, whichever comes first, per WAC 296-23-220.	Every 12 visits or one month, whichever comes first.
Physical modality administered in office by attending physician who is board qualified in physical medicine and rehabilitation. <ul style="list-style-type: none"> <li>Electrical stimulation - unattended</li> <li>Electrical stimulation - attended</li> </ul>	97014 97032	Not required.	Not applicable.
Physical modality administered in office by attending physician who is not board qualified in physical medicine and rehabilitation: <ul style="list-style-type: none"> <li>Electrical stimulation - unattended</li> <li>Electrical stimulation - attended</li> </ul>	1044M 1044M	Not required for first 6 visits per WAC 296-21 -290.	Must refer to licensed, registered physical therapist who must obtain authorization in blocks of 12 visits or one month, whichever comes first. Referral is not necessary if patient is in a remote area that has no licensed, registered physical therapists or physiatrists.

Refer to the *Medical Aid Rules and Fee Schedules* for reimbursement levels.

**Department of Labor and Industries  
Health Services Analysis  
PO Box 44322  
Olympia WA 98504-4322**

**BULKRATE  
USPOSTAGEPAID  
Olympia Washington  
Permit 312**

*Labor and Industries is an Equal Opportunity and Affirmative Action Employer. The Department complies with all federal rules and regulations and shall not discriminate on the basis of race, color, national origin, sex, creed, marital status, sexual orientation, age, disabled or Vietnam-era veteran as defined by applicable state and or federal regulations or statutes.*

*If you require special communication or accommodations needs, please contact the Department of Labor and Industries, PO Box 44400, Olympia, WA 98504-4400 or call the provider toll-free number 1-800-848-0811. Assistance for the hearing impaired can be obtained by calling the TDD number at 1-360-902-4663.*